

CERTIFICATE OF LIABILITY INSURANCE

UF ID. IN DATE (MM/DD/YYYY)

07/09/12 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). 678-715-9513 CONTACT PROOUCER Southern States Insurance 770-447-0704 PHONE (AJC, No. Ext):
E-MAIL ADDRESS:
PRODUCER Service Center P.O. Box 1117 Douglasville, GA 30133 CUSTOMER ID #: BLUEH-3 John Caffrey INSURER(S) AFFORDING COVERAGE NAIC # INSURFO INSURER A : United States Liab. Ins. Co. INSURER 8 INSURER C: INSURER D : INSURER E: INSURER F : **COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDLISUBA POLICY EFF POLICY EXP TYPE OF INSURANCE POLICY NUMBER LIMITS INSR WYD **GENERAL LIABILITY** 1,000,000 **EACH OCCURRENCE** PREMISES (Es occurrence) 07/13/12 07/13/13 X X MTK012L0070 50,000 A COMMERCIAL GENERAL LIABILITY \$ CLAIMS-MADE | X | OCCUR 5,000 MED EXP (Any one person) 1,000,000 \$ PERSONAL & ADV INJURY 2,000,000 **GENERAL AGGREGATE** \$ 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER PRODUCT8 - COMP/OP AGG S PRO-Prof. Lia POLICY 1,000,000 COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY S (Ea accident) ANY AUTO **BODILY INJURY (Per person)** ALL OWNED AUTOS **BODILY INJURY (Per accident)** \$ SCHEDULED AUTOS PROPERTY DAMAGE S (Per accident) HIRED AUTOS NON-OWNED AUTOS 5 **UMBRELLA LIAB EACH OCCURRENCE** OCCUR **EXCESS LIAB** CLAIMS-MADE **AGGREGATE** \$ S DEDUCTIBLE RETENTION WORKERS COMPENSATION WC STATU-TORY LIMITS AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT OFFICER/MEMBER EXCLUDED? NIA E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under
DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schoolule, 17 more space is required)
Certificate Holder is named Additional Insured as respects General Liability per written contract. **CERTIFICATE HOLDER** CANCELLATION JOHNS46 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN City of Johns Creek ACCORDANCE WITH THE POLICY PROVISIONS. 11360 Lakefield Drive Johns Creek, GA 30097 AUTHORIZED REPRESENTATIV John Caffrey